

# ATTACHMENT

23

Must Be Submitted Through the Law Library  
Offender Grievance Process

REQUEST TO STAFF

RECEIVED

TO: Dan Grogan unit manager  
(NAME AND TITLE OF STAFF MEMBER)

FACILITY/DIST/UNIT: JCCC

units 5 AUG 17 2015

DATE: 8-17-15

JCCC LAW LIBRARY

I have      have not ☒ already submitted a "Request to Staff" or grievance on this same issue.  
If yes, what date:                      facility:                      grievance #:                       
I affirm that I do      do not ☒ have a grievance pending on this issue.  
I affirm that I do      do not ☒ have a lawsuit of any type pending that relates in any way to this issue.  
If a lawsuit is pending, indicate case number and court:                       
This request      does      does not relate to a pending misconduct report. If it does, this request may only be answered by the investigator assigned to the misconduct.

SUBJECT: State completely, but briefly, the problem on which you desire assistance. This statement must be specific as to the complaint, dates, places, personnel involved, and how you were affected. One issue or incident per "Request to Staff." Your failure to specifically state your problem may result in this being returned unanswered.

The overcrowding and understaffing at JCCC has endangered my health and safety. All essential services have been adversely affected. I know this problem exists at the other D.O.C. facilities also.

(USE OTHER SIDE IF MORE SPACE IS NEEDED. DO NOT ATTACH ADDITIONAL PAGES.)

ACTION REQUESTED: State exactly how you believe your request may be handled; that is, what exactly should be done and how.

~~Please tell me if anything can and will be done to~~  
alleviate this problem within the existing budget,  
~~or whether this is even a grievable issue.~~

NAME: Kent Savage (PRINT) DOC NUMBER: 646862 UNIT & CELL NUMBER: 5N-28

SIGNATURE: Kent Savage WORK ASSIGNMENT: unassigned

DO NOT WRITE BELOW THIS LINE

DISPOSITION:

Mr. Savage.  
Your Subject statement must be specific as to the complaint.

RECEIVED  
AUG 19 2015

STAFF MEMBER

DATE

1. Original to file
2. Copy to offender

JCCC LAW LIBRARY

DOC 090124D (R 11/14)

①

# OFFENDER GRIEVANCE

date \_\_\_\_\_  
code \_\_\_\_\_  
no. \_\_\_\_\_

8-25-15 date  
3 code  
JCCC 18-167 no.

DO NOT WRITE OR STAMP ABOVE THIS LINE

Date 8-24-15 Facility or District JCCC  
Name Kent Savage Facility Housing Unit 5  
(Print)  
DOC Number 646862

Have you previously submitted a grievance on this same issue? No If yes, what date \_\_\_\_\_, facility \_\_\_\_\_, grievance # \_\_\_\_\_. You must submit this completed original within 15 calendar days of the receipt of the response to the "Request to Staff". The "Request to Staff" must have been submitted within 7 calendar days of the incident. Do not include/attach anything to this grievance except the "Request to Staff" including the response. You may quote from or make reference to statutes, operations, field, or administrative memoranda, department publications (time sheets, inventory forms, assessments, etc.). You will be permitted only one opportunity to correct any error(s) made in submitting your grievance.

1. The nature of your complaint. This statement must be specific as to the complaint, dates, places, personnel involved, and how you were affected. One issue or incident per grievance. Use backside of this page only, if necessary.

See backside of page

2. Informal action taken (including dates) to resolve the complaint, as well as the names of those employees from whom you sought an answer to your grievance.

On 8-17-15 I sent a request to staff (RTS) to unit manager Grogan. See attached RTS with reply.

3. The action you believe the reviewing authority may lawfully take.

Please answer my question.

Grievance report sent to (warden/district supervisor/correctional health services administrator):

Name Jason Bryant Title JCCC Warden  
Signature of Grievant Kent Savage Date Sent to Reviewing Authority 8-24-15

1. Original to file
2. Copy to offender

RECEIVED  
AUG 25 2015

DOC 090124A (R 11/14)

(2)

On 8-17-15 I sent a Request to Staff (RTS) to ~~the~~ unit manager Grogan, saying, "The overcrowding and understaffing has endangered my health and safety. All essential services have been adversely affected. I know this problem exists at the other DOC facilities also."

I asked if anything can and will be done to alleviate this problem within the existing budget, or ~~what~~ whether this is even a grievable issue. On 8-20-15 I received his reply saying, "your subject statement must be specific as to the complaint." That is ~~is~~ just evasive double talk. my ~~set~~ statement is clear and specific, as is my question.

Date: August 25, 2015

To: Kent Savage DOC Number: 646862 Unit 5

From: Jason Bryant, Warden Facility/Location: JCCC

RE: Grievance # JCCC 15-167

A copy of your grievance correspondence is being returned unanswered for the following reasons(s):

- ☐ No staff response affixed to the "Request to Staff."
- ☐ No informal action documented; a "Request to Staff" was not included.
- ☐ "Request to Staff" submitted out of time from date of incident. There is no mailbox rule regarding submission of a "Request to Staff." The document was not received in the appropriate office within the required time frame.
- ☐ Attachments included with "Request to Staff." Only the front and back of the form may be utilized.
- ☐ Grievance submitted out of time from date of incident or date of response to the "Request to Staff." There is no mailbox rule regarding submission of a grievance report form. The document was not received in the appropriate office within the required time frame.
- ☐ Offender signature and/or date not affixed to grievance.
- ☐ Offender on grievance restriction and a duly verified affidavit was not included.
- ☐ Grievance form(s) not legibly written in blue or black ink.
- ☐ Pencil, highlighter or other color of ink used on grievance forms. A pencil may only be used by an offender who is housed in SHU on the day that his/her document is submitted, and then only if the facility prohibits the use of pens in the SHU.
- ☐ Drawing, decorating, doodling, and/or comments affixed in the margins of the pages.
- ☐ Attachments included with grievance. No additional pages allowed except for the "Request to Staff" (photocopy permissible).
- ☐ Grievance forms contain alterations. Altered documents will cause a grievance to be rejected as improperly filed.
- ☒ **X** Not an issue that is grievable to the Oklahoma Department of Corrections (i.e., involves private prison, misconduct, pending litigation; not within or under the authority and control of the Oklahoma Department of Corrections; no remedy is allowed).
- ☐ More than one issue or incident included. Only one issue or incident allowed per "Request to Staff," and per grievance.
- ☐ Complaint is not of a sensitive and/or emergency nature as described in OP-090124; consequently, the standard grievance process outlined in OP-090124 must be followed.
- ☐ Requests for disciplinary action against staff will not be addressed in the grievance process.
- ☐ Original "Offender Grievance Report Form" was not submitted.
- ☐ Top portion of Request to Staff form not complete.
- ☐ Action Requested not completed on Request to Staff form.
- ☐ Request to Staff/Grievance incomplete: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

Grievances that contain any errors in the filing process will be returned unanswered. The offender may correct the errors within 10-days of receipt of the notice from the reviewing authority. If the offender fails to correct the errors, the grievance will be returned unanswered and the offender will have waived/forfeited the opportunity to proceed in the grievance process. **DO NOT RETURN THIS FORM.**

**NOTE:** All of the information contained herein may be found in OP-090124. It is your responsibility to properly submit your grievance correspondence to the appropriate staff person in accordance with OP-090124. **WARNING:** A grievance restriction may be imposed for abuse of the grievance process, as explained in section IX of OP-090124.

(4)

(Rev. 01-31-12)

Jccc

9-29

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Jccc 15-167

Offense Code and Class \_\_\_\_\_  
Grievance Category Code \_\_\_\_\_

**Misconduct/Grievance Appeal Form To Administrative Review Authority**

Offender Name: Kent Savage

DOC Number: 646862

Facility Where Offense/Grievance Occurred:  
James Crabtree Correctional Center (Jccc)

Offense Code/Class: \_\_\_\_\_

Date of misconduct violation: \_\_\_\_\_

Date of Disciplinary Hearing: \_\_\_\_\_

Facility Misconduct Appeal Number \_\_\_\_\_

☒ Facility Grievance Appeal Number

Jccc 15-167

I have received the response of the reviewing authority at the facility on: \_\_\_\_\_

Kent Savage  
Signature of Offender

**RECEIVED**

AUG 31 2015

8-26-15

8-26-15

Date Response Received

**ADMINISTRATIVE  
REVIEW  
AUTHORITY**

Fill out this form in blue or black ink. Writing must be in blue or black ink. DO NOT ATTACH ANY OTHER PAGES. (Use ONLY the back side of this page, if necessary). Your appeal will be returned to you unanswered if any other pages are submitted.

☐

Newly discovered/available evidence not considered by the reviewing authority, relevant to the issue, necessary for a proper decision, and why the evidence was not previously available which if considered may alter the decision (you must clearly state the newly discovered/available evidence); or

☒

Probable error committed by the reviewing authority in the decision such as would be grounds for reversal (you must clearly state the error committed by the reviewing authority, including citing the part of procedures or statutes not followed by the reviewing authority).

Response:

I understand that in accordance with OP-060125/OP-090124, I will be charged \$2 to appeal a misconduct/grievance to the director or chief medical officer (or designee), and that this form is also a request for disbursement of funds from my trust fund draw account. If I do not have enough funds to cover this cost, the amount will be collected as soon as funds become available.

Kent Savage  
Signature of Offender

Date

8-26-15

DOC 060125V (R 10/12)

(5)

On 8-12-15 I sent a Request to Staff (RTS) to Unit manager Grogan saying, "The overcrowding and understaffing has endangered my health and safety. All essential services have been adversely affected. I know this problem exists at the other D.C. facilities also." I asked if anything can and will be done to alleviate this problem within the existing budget or whether this is even a grievable issue. On 8-20-15 I received his reply saying, "your subject statement must be specific as to the complaint." That is just evasive double talk. My statement is clear and specific, as to my question, I submitted grievance no. JCCC 15-167 on 8-24-15. On 8-26-15 I got it back from warden Jason Bryant, saying this is not a grievable issue, I agree, but am appealing anyway to properly exhaust my administrative remedies.

ROBERT PATTON  
DIRECTOR



MARY FALLIN  
GOVERNOR

ADMINISTRATIVE REVIEW AUTHORITY  
OKLAHOMA DEPARTMENT OF CORRECTIONS  
P.O BOX 11400 OKC, OK. 73111-0400

JCCC 15-167

Date: SEPTEMBER 23, 2015

To: SAVAGE, KENT #646862

Location: JCCC

From: Mark Knutson, Director's Designee *Mark Knutson*

**Your grievance/correspondence was filed improperly for the following reason(s):**

- ☐ 1. No facility head response to the grievance
- ☐ 2. No informal action, "Request to Staff" response
- ☐ 3. Out of time from date of alleged incident until filing request to staff.
- ☐ 4. Out of time from date of response to request to staff until filing of grievance with facility head.
- ☐ 5. Received out of time from date of facility head response
- ☐ 6. No grievance form signed by inmate
- ☐ 7. Inmate on grievance restriction and/or proper documentation not included.
- ☐ 8. Must be legibly written in blue or black ink. No pencil or other color of ink is allowed. No Doodling or writing in margins, NO HIGHLIGHTER.
- ☐ 9. Attachments to the grievance/appeal (no additional pages allowed)
- ☒ 10. Not an issue grievable to Oklahoma Department of Corrections (Private prison property, misconduct (see OP-090124, Section II. B. 1.), litigation pending, not within/under the authority/control of the Department of Corrections, etc.)
- ☒ 11. More than 1 issue - only 1 issue allowed per grievance/Request to Staff
- ☐ 12. Not of a sensitive/emergency nature. You must follow the standard grievance process including giving the facility an opportunity to respond.
- ☐ 13. Requests for disciplinary action against staff will not be addressed in the grievance process.
- ☐ 14. No grounds for appeal (see OP-090124, Section VII. A.)
- ☐ 15. Appeal not signed/dated
- ☐ 16. The original only must be submitted, no photocopies.
- ☐ 17. The ruling of the Administrative Review Authority or Director's Designee is final.
- ☐ 18. Only the current DOC grievance and "Request to Staff" forms will be accepted.
- ☐ 19. Additional issues submitted in the grievance appeal and not presented in the initial grievance to the facility head for response, will not be addressed by this office.
- ☐ 20. You have failed to follow previous instructions for filing this grievance. Due to your continued failure to properly file this grievance you are now out of time.
- ☐ 21. You have not proven by substantial evidence that you did not submit your grievance in a timely manner through absolutely no fault of your own.
- ☒ 22. This grievance is unanswerable as there are no time frames specified for the alleged action(s) to have occurred
- ☐ 23. No mail box rule
- ☐ 24. Your appeal must be written on the Misconduct/Grievance Appeal form (DOC060125Veffective10/12).
- ☐ 25. You will be afforded ONE FINAL opportunity to properly submit your corrected grievance/appeal within 10 Days of receipt of this form. DO NOT RETURN THIS FORM WITH YOUR CORRECTED APPEAL.
- ☐ 26. Other: YOU MUST PROPERLY ADDRESS YOUR ISSUES THROUGH THE OFFENDER GRIEVANCE PROCESS OP-090124.

**NOTE:** Abuse of the grievance process as explained in section IX of OP-090124, will result in restrictions being imposed.

I acknowledge receipt of this response \_\_\_\_\_

Offender's signature and date

(7)

**OAG/KYH/Savage v. Fallin - CIV-15-1194 (WD)/0582**